DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. underneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

ELECTRONIC DEPOSIT BOX SYSTEM

is attached hereto and includes ar was filed in the United States on was filed as PCT international Ap	as Application No. with amendr	nent(s) filed on (grappicable) ended under PCT Articl	e) e 19 on (1 ^{applicable)}		
hereby state that I have reviewed ar mendment referred to above.	nd understand the contents of the	above identified appli	cation, including the cl	aims, as amended by any	
acknowledge the duty to disclose info	rmation known to me to be materia	al to patentability as def	ined in Title 37, Code of	Federal Regulations, §1.56.	
hereby claim foreign priority benefits sted below and have also identified be n which priority is claimed:	clow any foreign application for pa	tent or inventor's certific	cate having a filing date b	efore that of the application	
EARLIEST FOREIGN APPLICATI	ON(S), IF ANY, FILED PRIOR				
APPLICATION NUMBER	COUNTRY		onth, year)	PRIORITY CLAIMED	
GB 00 14 414.7	Great Britain	The second secon		S 🗵 NO 🗆	
hereby claim the benefit under Title APPLICATION		of any United States pro	ovisional application(s)	listed below.	
hereby claim the benefit under Title 3 of each of the claims of this applicatio 15, United States Code §112, I acknow Regulations, §1.56 which became available polication:	n is not disclosed in the prior Unit vledge the duty to disclose informa	ted States application in ation which is material to	the manner provided by o patentability as defined	v the first paragraph of Title I in Title 37, Code of Federa	
		STATUS			
APPLICATION SERIAL NO.					
APPLICATION SERIAL NO.	FILING DATE	PATENTED	PENDING	ABANDONED	
APPLICATION SERIAL NO.	FILING DATE	PATENTED	PENDING	ABANDONED	

POWER OF ATTORNEY: As a named inventor, I hereby appoint H.T. Than (Reg. No. 38,632), and Granetta M. Coleman (Reg. No. 39,638), whose address is Sutton Executive Center, 3201 New Mexico Avenue, N.W., Suite 350, Washington, D.C. 20016, as my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

DIRECT TELEPHONE CALLS TO: SEND CORRESPONDENCE TO: The H.T. Than Law Group (202) 363-2620 3201 New Mexico Avenue, N.W., Suite 350 Washington, D.C. 20016 MIDDLE NAME FIRST NAME LAST NAME FULL NAME Llewellyn Ronald OF INVENTOR Burges 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE & 0 Great Britian Great Britian Glasgow CITIZENSHIP ZIP CODE STATE OR COUNTRY STREET POST OFFICE Great Britian G73 1SO Glasgow **ADDRESS** C/O Business Information Publications Park House, 300 Glasgow Road MIDDLE NAME FIRST NAME LASTINAME FULL NAME Sean David OF INVENTOR Groundwater 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE & 0 Great Britian CITIZENSHIP Glasgow 2 STATE OR COUNTRY ZIP CODE STREET CITY POST OFFICE G73 1SQ Great Britian C/O Business Information Publications Glasgow ADDRESS Ltd. Park House, 300 Glasgow Road MIDDLE NAME FIRST NAME LAST NAME **FULL NAME** Allan Scott OF INVENTOR Smith 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY CITY RESIDENCE & 0 Great Britian Great Britian Glasgow 3 CITIZENSHIP STATE OR COUNTRY ZIP CODE STREET POST OFFICE G73 1SQ Great Britian Glasgow C/O Business Information Publications ADDRESS Ltd. Park House, 300 Glasgow Road MIDDLE NAME FIRST NAME LAST NAME **FULL NAME** OF INVENTOR COLINTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY CITY 0 RESIDENCE & CITIZENSHIP STATE OR COUNTRY ZIP CODE CITY POST OFFICE ADDRESS MIDDLENAME FIRST NAME LAST NAME FULL NAME OF INVENTOR 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY 0 RESIDENCE & CITIZENSHIP STATE OR COUNTRY ZIP CODE CITY STREET POST OFFICE ADDRESS MIDDLE NAME FIRST NAME LAST NAME FULL NAME OF INVENTOR 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY 0 RESIDENCE & CITIZENSHIP 6 STATE OR COUNTRY ZIP CODE CITY STREET POST OFFICE ADDRESS

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203	
DATE	DATE	DATE	
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206	
DATE	DATE	DATE	